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**State:** Arkansas **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** MS02I Individual Medicare Supplement - Pre-Standardized/MS02I.000 Medicare Supplement - Pre-Standardized  
**Product Name:** 2013 MOO PreStandardized Med Supp  
**Project Name/Number:** 2013 Annual Rate Filing/2013 MOO

## Filing at a Glance

Company: Mutual of Omaha Insurance Company  
Product Name: 2013 MOO PreStandardized Med Supp  
State: Arkansas  
TOI: MS02I Individual Medicare Supplement - Pre-Standardized  
Sub-TOI: MS02I.000 Medicare Supplement - Pre-Standardized  
Filing Type: Rate  
Date Submitted: 12/18/2012  
SERFF Tr Num: MUTA-128810452  
SERFF Status: Closed-Approved-Closed  
State Tr Num:  
State Status: Approved-Closed  
Co Tr Num: BILL ROLLINS  
  
Implementation: 03/01/2013  
Date Requested:  
Author(s): Mark Schmitz, Bill Rollins  
Reviewer(s): Stephanie Fowler (primary)  
Disposition Date: 01/10/2013  
Disposition Status: Approved-Closed  
Implementation Date:

State Filing Description:

**State:** Arkansas  
**TOI/Sub-TOI:** MS021 Individual Medicare Supplement - Pre-Standardized/MS021.000 Medicare Supplement - Pre-Standardized  
**Product Name:** 2013 MOO PreStandardized Med Supp  
**Project Name/Number:** 2013 Annual Rate Filing/2013 MOO

**Filing Company:** Mutual of Omaha Insurance Company

## General Information

Project Name: 2013 Annual Rate Filing  
Project Number: 2013 MOO  
Requested Filing Mode: Review & Approval

Explanation for Combination/Other:  
Submission Type: New Submission  
Overall Rate Impact:

Deemer Date:  
Submitted By: Mark Schmitz

Status of Filing in Domicile: Not Filed  
Date Approved in Domicile:  
Domicile Status Comments: A filing will be submitted to Nebraska, our state of domicile, in the near future.  
Market Type: Individual  
Individual Market Type:  
Filing Status Changed: 01/10/2013  
State Status Changed: 01/10/2013  
Created By: Bill Rollins  
Corresponding Filing Tracking Number:

### Filing Description:

2013 PreStandardized Medicare Supplement Annual Loss Ratio and Rate Adjustment Filing

This filing demonstrates loss ratio compliance and requests to maintain the rates at the current rate level.

## Company and Contact

### Filing Contact Information

Bill Rollins, Actuarial Assistant  
Mutual of Omaha  
Mutual of Omaha Plaza  
Omaha, NE 68175

bill.rollins@mutualofomaha.com  
402-351-6216 [Phone]

### Filing Company Information

Mutual of Omaha Insurance Company	CoCode: 71412	State of Domicile: Nebraska
Mutual of Omaha Plaza	Group Code: 261	Company Type: Health Insurance
Omaha, NE 68175	Group Name:	State ID Number:
(402) 351-2304 ext. [Phone]	FEIN Number: 47-0246511	

## Filing Fees

Fee Required? Yes  
Fee Amount: \$50.00  
Retaliatory? No  
Fee Explanation:  
Per Company: No

Company	Amount	Date Processed	Transaction #
Mutual of Omaha Insurance Company	\$50.00	12/18/2012	65856160

<b>SERFF Tracking #:</b>	MUTA-128810452	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	BILL ROLLINS
<b>State:</b>	Arkansas	<b>Filing Company:</b>	Mutual of Omaha Insurance Company		
<b>TOI/Sub-TOI:</b>	MS021 Individual Medicare Supplement - Pre-Standardized/MS021.000 Medicare Supplement - Pre-Standardized				
<b>Product Name:</b>	2013 MOO PreStandardized Med Supp				
<b>Project Name/Number:</b>	2013 Annual Rate Filing/2013 MOO				

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	01/10/2013	01/10/2013

<b>State:</b>	Arkansas	<b>Filing Company:</b>	Mutual of Omaha Insurance Company
<b>TOI/Sub-TOI:</b>	MS021 Individual Medicare Supplement - Pre-Standardized/MS021.000 Medicare Supplement - Pre-Standardized		
<b>Product Name:</b>	2013 MOO PreStandardized Med Supp		
<b>Project Name/Number:</b>	2013 Annual Rate Filing/2013 MOO		

## Disposition

Disposition Date: 01/10/2013

Implementation Date:

Status: Approved-Closed

Comment: We have approved this rate filing; no increase was requested nor approved.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Mutual of Omaha Insurance Company	0.000%	0.000%	\$0	5	\$20,080	0.000%	0.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Rate	2013 Rates	Approved-Closed	Yes

<b>State:</b>	Arkansas	<b>Filing Company:</b>	Mutual of Omaha Insurance Company
<b>TOI/Sub-TOI:</b>	MS021 Individual Medicare Supplement - Pre-Standardized/MS021.000 Medicare Supplement - Pre-Standardized		
<b>Product Name:</b>	2013 MOO PreStandardized Med Supp		
<b>Project Name/Number:</b>	2013 Annual Rate Filing/2013 MOO		

## Rate Information

Rate data applies to filing.

<b>Filing Method:</b>	SERFF
<b>Rate Change Type:</b>	Neutral
<b>Overall Percentage of Last Rate Revision:</b>	0.000%
<b>Effective Date of Last Rate Revision:</b>	03/01/2012
<b>Filing Method of Last Filing:</b>	SERFF

## Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Mutual of Omaha Insurance Company	0.000%	0.000%	\$0	5	\$20,080	0.000%	0.000%

<b>State:</b>	Arkansas	<b>Filing Company:</b>	Mutual of Omaha Insurance Company
<b>TOI/Sub-TOI:</b>	MS021 Individual Medicare Supplement - Pre-Standardized/MS021.000 Medicare Supplement - Pre-Standardized		
<b>Product Name:</b>	2013 MOO PreStandardized Med Supp		
<b>Project Name/Number:</b>	2013 Annual Rate Filing/2013 MOO		

## Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information		Attachments
1	Approved-Closed 01/10/2013	2013 Rates	H66, M101, M115, M133, M156, M3, M4, M6, MD42, 32CMO, 59CMO, 3562M, 3563M, 3564M, 3565M, 24310, 24311	Revised	Previous State Filing Number:	MUTA-127836586	ARRates2013.pdf AR Rate Summary 2013.pdf
					Percent Rate Change Request:		

**Mutual of Omaha Insurance Company**  
**Schedule of MONTHLY Base Rates**  
**For Policy Form 32CMO – ARKANSAS**

UNISEX

AGE

All Ages      970.53

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company  
Schedule of MONTHLY Base Rates  
For Rider Form 3562M – ARKANSAS  
When Attached to Policy Form 50VB**

UNISEX

AGE

All Ages      248.91

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.



**Mutual of Omaha Insurance Company  
Schedule of MONTHLY Base Rates  
For Rider Form 3563M – ARKANSAS  
When Attached to Policy Form 50VB**

UNISEX

AGE

All Ages      270.18

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company  
Schedule of MONTHLY Base Rates  
For Rider Form 3564M – ARKANSAS  
When Attached to Policy Form 51VB**

UNISEX

AGE

All Ages      248.91

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company  
Schedule of MONTHLY Base Rates  
For Rider Form 3565M – ARKANSAS  
When Attached to Policy Form 51VB**

UNISEX

AGE

All Ages      270.18

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company  
Schedule of MONTHLY Base Rates  
For Policy Form 59CMO – ARKANSAS**

**Date Printed:**

**12/13/2012**

UNISEX

AGE

All Ages      529.31

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company**  
**Schedule of MONTHLY Base Rates**  
**For Policy Form ATMSB – ARKANSAS**

Date Printed:

12/13/2012

UNISEX

ISSUE AGE	
65 - 69	157.25
70 - 74	157.25
75 - 79	157.25
80 - 84	157.25

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company**  
**Schedule of MONTHLY Base Rates**  
**For Policy Form ATMSE – ARKANSAS**

**Date Printed:**

**12/13/2012**

UNISEX

ISSUE AGE	
65 - 69	593.91
70 - 74	593.91
75 - 79	593.91
80 - 84	593.91

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company**  
**Schedule of MONTHLY Base Rates**  
**For Policy Form H66 – ARKANSAS**

UNISEX

ATTAINED  
AGE

65 &amp; Over      787.40

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company**  
**Schedule of MONTHLY Base Rates**  
**For Policy Form M101 – ARKANSAS**

UNISEX

ATTAINED

AGE

65 &amp; Over      288.83

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.



**Mutual of Omaha Insurance Company  
Schedule of MONTHLY Base Rates  
For Policy Form M115 – ARKANSAS**

UNISEX

ATTAINED

AGE

65 &amp; Over 285.65

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company**  
**Schedule of MONTHLY Base Rates**  
**For Policy Form M133 – ARKANSAS**

UNISEX

ATTAINED  
AGE

65 &amp; Over      285.74

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company  
Schedule of MONTHLY Base Rates  
For Policy Form M156 – ARKANSAS**

UNISEX

ATTAINED  
AGE

65 & Over      280.43

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company**  
**Schedule of MONTHLY Base Rates**  
**For Policy Form M3 – ARKANSAS**

UNISEX

ATTAINED  
AGE

65 &amp; Over 821.52

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company**  
**Schedule of MONTHLY Base Rates**  
**For Policy Form M4 – ARKANSAS**

UNISEX

ATTAINED

AGE

65 &amp; Over      568.35

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company**  
**Schedule of MONTHLY Base Rates**  
**For Policy Form M6 – ARKANSAS**

UNISEX

ATTAINED  
AGE

65 &amp; Over      388.83

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**Mutual of Omaha Insurance Company**  
**Schedule of MONTHLY Base Rates**  
**For Policy Form MD42 – ARKANSAS**

UNISEX

AGE

All Ages      311.40

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

**MUTUAL OF OMAHA INSURANCE COMPANY  
PRE-STANDARDIZED MEDICARE SUPPLEMENT  
ARKANSAS**

<b><u>FORM</u></b>	<b><u>DATE APPROVED</u></b>		<b><u>REVISED RATE SCHEDULE</u></b>	
H66	08/30/1982	H66	AR BASE RATE	11/13/2012 00011
M101	09/19/1985	M101	AR BASE RATE	11/13/2012 00011
M115	12/05/1988	M115	AR BASE RATE	11/13/2012 00011
M133	12/05/1988	M133	AR BASE RATE	11/13/2012 00011
M156	05/07/1990	M156	AR BASE RATE	11/13/2012 00011
M3	06/08/1982	M3	AR BASE RATE	11/13/2012 00011
M4	02/13/1985	M4	AR BASE RATE	11/13/2012 00011
M6	06/08/1982	M6	AR BASE RATE	11/13/2012 00011
32CMO	05/21/1981	32CMO	AR BASE RATE	11/13/2012 00011
3562M (50VB)	09/25/1975	3562M (50VB)	AR BASE RATE	11/13/2012 00011
3563M (50VB)	09/25/1975	3563M (50VB)	AR BASE RATE	11/13/2012 00011
3564M (51VB)	09/25/1975	3564M (51VB)	AR BASE RATE	11/13/2012 00011
3565M (51VB)	09/25/1975	3565M (51VB)	AR BASE RATE	11/13/2012 00011
59CMO	05/21/1981	59CMO	AR BASE RATE	11/13/2012 00011
ATMSB	03/13/1986	ATMSB	AR BASE RATE	11/13/2012 00012
ATMSE	03/13/1986	ATMSE	AR BASE RATE	11/13/2012 00012
MD42	11/10/1986	MD42	AR BASE RATE	11/13/2012 00011